

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000014684

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: OGS INVESTMENTS, INC.

**Current Principal Place of Business:**

720 SOUTH PINE AVENUE  
OCALA, FL 34474

**New Principal Place of Business:**

**Current Mailing Address:**

720 SOUTH PINE AVENUE  
OCALA, FL 34474

**New Mailing Address:**

FEI Number: 59-3493981      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

IGLER & DAUGHERTY, P.A.  
1501 PARK AVENUE EAST  
TALLAHASSEE, FL 32301      US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: QUINCEY, JAMES S  
Address: P.O BOX 23939  
City-St-Zip: GAINESVILLE, FL 32602

Title: D      ( ) Delete  
Name: WALKER, BENNY  
Address: 113 NW 8TH AVENUE  
City-St-Zip: GAINESVILLE, FL 32601

Title: D      ( ) Delete  
Name: LEWIS, CARROLL  
Address: 6800 SW 18TH TERRACE ROAD  
City-St-Zip: OCALA, FL 34476

Title: D      ( ) Delete  
Name: WARREN, MICHAEL  
Address: 502 NW 16TH AVENUE  
City-St-Zip: GAINESVILLE, FL 32601

Title: D      ( ) Delete  
Name: SMITH, CHRISTOPHER  
Address: 2025 SW 112TH STREET  
City-St-Zip: GAINESVILLE, FL 32607

Title: D      ( ) Delete  
Name: BUTLER, DEBORAH  
Address: 2306 W 13TH STREET, SUITE 1206  
City-St-Zip: GAINESVILLE, FL 32608

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHERI HIGGINBOTHAM

CFO

04/14/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date